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PTO/SB/21 (09-04)
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Milder the Paderwork Reduction Act of 1995.	Application Number	09/845,575		disblavs a valid OMB control number.							
TRANSMITTAL	Filing Date	04-30-2001									
FORM	First Named Inventor	LAMBERT, J	LAMBERT, John H.								
	Art Unit	2176	112								
	Examiner Name	TRAN, Quo	c A								
(to be used for all correspondence after initial f	Attornov Docket Number	,									
Total Number of Pages in This Submission	17 Allomey Bocket Number	03.0067									
ENCLOSURES (Check all that apply)											
Fee Transmittal Form	Drawing(s)		Appea	Allowance Communication to TC							
Tee Attached	Licensing-related Papers		of Appeals and Interferences Appeal Communication to TC								
Amendment/Reply	Petition Petition to Convert to a			al Notice, Brief, Reply Brief)							
After Final	Provisional Application		Propri	ietary Information							
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence		Status	s Letter							
Extension of Time Request	Terminal Disclaimer	~	Other below	Enclosure(s) (please Identify							
Express Abandonment Request	Request for Refund		Red	uest for Continued							
	CD, Number of CD(s)	Ì		mination							
Information Disclosure Statement											
Certified Copy of Priority	Landscape Table on C	J									
Document(s)	rtomanto										
Reply to Missing Parts/ Incomplete Application				•							
Reply to Missing Parts	•										
under 37 CFR 1.52 or 1.53											
Firm Name	TURE OF APPLICANT, ATTO	RNEY, OR AG	ENT								
Clock Tower Law	Group										
Signature	Miller										
Printed name Joshua D. Mathe	r										
Date 08-05-2005		eg. No. 53,282									
CE	RTIFICATE OF TRANSMISS	ION/MAILING		TO THE THE THE TENTON OF THE T							
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:											
Signature John J. Walk											
Typed or printed name Joshua [Date	08-05-2005								

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PTO/SB/17 (12-04v2)

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AUG 0 5 2005

Effective on 12/08/2004.			Complete if Known								
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Number		09/845,575						
FEE TRANSMITTAL For FY 2005			Filing Date		04-30-2001						
			First Named Inv	entor/	LAMBER	Н.					
			Examiner Name	Э	TRAN, Quoc A.						
Applicant claims small entity status. See 37 CFR 1.27			Art Unit 2176								
TOTAL AMOUNT OF PAYMENT (\$) 905				Attorney Docket No. 03.0067							
METHOD OF PAYMENT (check all that apply)											
Check Credit Card Money Order None Other (please identify):											
Deposit Account Deposit Account Number: Deposit Account Name:											
For the abov	e-identified deposit a	sccount, the Direc	tor is her	eby authorized to	: (check	all that ap	oly)				
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee											
Charge any additional fee(s) or underpayments of fee(s)											
under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card											
FEE CALCULAT											
1. BASIC FILING		YAMINATION	FEES								
I. BASIC FIEIRO,	FILING F			CH FEES	EXAN	MINATION	FEES				
Application Typ	<u>S</u> e Fee (\$)	mall Entity Fee (\$)	Fee (\$)	Small Entity	Fee	(\$) Small		Fees Paid (\$)			
Utility	300	150	500	! <u>Fee (\$)</u> 250	200			1000 1 010 101			
Design	200	100	100	50	130		_				
Plant	200	100	300	150	160						
Reissue	300	150	500	250	600						
Provisional	200	100	0	0	000	-)				
2. EXCESS CLA		100	U	U	·	,	J	Small Entity			
Fee Description						<u>F</u>	ee (\$)	Fee (\$)			
Each claim over 20 (including Reissues)							50	25			
	ent claim over 3 (i	ncluding Reissi	ues)				200 360	100 180			
Multiple depen <u>Total Claims</u>	Extra Claims	s Fee (\$)	Foo	Paid (\$)				pendent Claims			
•	r HP =	X	=	1 414 (4)			ee (\$)	Fee Paid (\$)			
-	r of total claims paid for	, if greater than 20.		D-:-! (#)							
Indep. Claims - 3 or	Extra Claim HP =		<u>- Fee</u>	Paid (\$)			-				
HP = highest number of independent claims paid for, if greater than 3.											
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer											
								each additional 50			
sheets or frac	tion thereof. See	35 U.S.C. 41(a)	(1)(G)	and 37 CFR 1.1	6(s).		,	· · · · · · · · · · · · · · · · · · ·			
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = / 50 = (round up to a whole number) x =											
4. OTHER FEE(S) Fees Paid (\$)											
Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): time extension (\$510), Request for continued examination (\$395)											
SUBMITTED BY Posistration No.											
Signature	(Joshua VV	Wolfky	- 17	Registration No.	53,282	2	Telephor	^{ne} 978-823-0008			

Date Name (Print/Type) Joshua D. Mather This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

(Attorney/Agent)